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ROLES OF GOVERNMENT, INDUSTRY IN THE LIFE OF DISABLED JAPANESE

SUMMARY

How a society treats citizens who have disabilities gives an insight into the kinds of civil rights policies that a government will adopt and industry follow. While Japan does not have the equivalent of the new Americans with Disabilities Act, termed a civil rights act for people with handicaps, various laws do address the responsibility of government to provide for society's welfare and the rights of Japanese citizens to employment and equal opportunities in education.

Foreign influences have helped raise awareness about untapped resources among the disabled in Japan, where the image of people with disabilities being hidden away is being dispelled gradually. A healthy economy also has enabled Japan to improve both job opportunities and economic assistance for disabled people in recent years.

A spotty pattern of improvement in facilities that allow easier access for people with physical handicaps underscores the uneven distribution of opportunities for disabled people in Japan. Moreover, not all those with disabilities have made advances. People with mental illness or mental retardation have made less progress toward participation in the mainstream than those with physical limitations.

At the heart of questions about how well people with disabilities fare in Japan is how much the members of society, both those with handicaps and those without, should be protected. Strong overtones of paternalism color Japanese regulations, with debatable consequences of good or ill for society as a whole. Adding to the debate is the question of whether the perils of paternalism outweigh the risks that those who are the least able to survive on their own might be ignored under a philosophy of mainstreaming.

Disability, A Fact of Life

Even if all people were born without any physical or mental defects, disabilities would arise from accidents, illnesses and other unintended or even intended occurrences, such as war. The latest government survey to determine the number of people with physical disabilities in Japan, taken in 1987, listed 2.6 million people, about 2 percent of the population. Given a history in which many Japanese with disabilities have been kept at home and "hidden away," some observers feel this ratio is too low. Americans with disabilities, for example, make up about 17 percent of the U.S. population. Statistics are unavailable on Japanese with mental disabilities, since concerns about privacy and human rights violations led to the discontinuation of such reviews. Based on the last overall survey of people with mental illness or mental retardation, conducted in 1963, the government estimates that mental disabilities affect about 1.6 million Japanese, or 1.3 percent of the population. These figures, too, may be low; internationally recognized trends lead psychiatrists to calculate that schizophrenia alone affects 1 percent of every population, while depression impacts an estimated 5 to 6 percent.[1]

The majority of physically disabled Japanese are handicapped because of a limb or body trunk impairment considered severe enough to interrupt daily activities. This group accounts for roughly 60 percent of the disabled population. Another 13 percent have severe visual impairment; 15 percent have hearing or language disabilities; about 12 percent suffer from permanent internal disorders, such as heart or lung deficiencies. An estimated 7 percent have multiple physical impairments. The mentally disabled include both the people with mental retardation and those suffering from schizophrenia or other mental illnesses.

Most often cited as a source of physical disability in Japan is toxic, infectious or some other disease; roughly 64 percent of the disabilities noted in the 1987 study resulted from this cause. Disease was the culprit in more than 70 percent of the cases of disabilities among children that year, with cerebral palsy the predominant problem. Other reasons for disability included accidents (21 percent overall and 4.7 percent for children); what the government describes as injuries at birth (4 percent overall and 32.7 percent of disabled children); and wartime injuries and illnesses (3.8 percent overall). An unspecified "other" caused 9 percent of overall disability and 13 percent of children's.

Despite a substantial decline during the past 10 years in the number of work-related accidents and illnesses sufficient to trigger workers' compensation payments,[2] the number of Japanese impaired by other causes is expected to continue to increase (see Table 1). Advances in emergency medical services and general medical care mean more injured people will survive accidents and diseases, although they may be temporarily or permanently disabled. As the population ages, the elderly, who are at greater risk of incapacitating disabilities, can be expected to comprise more than half the number of people with disabilities. Senior citizens made up 58 percent of the disabled population in the government's 1987 survey; moreover, cerebrovascular disease, estimated as the cause of 14.7 percent of the disabilities that year, primarily affects older adults.

Table 1: **Percentage of Japanese Population with Physical Disabilities, 1960-87**

	1960	1965	1970	1980	1987
Number (in thousands)	829	1,048	1,314	1,977	2,413
Share of Population	0.8%	1.1%	1.2%	1.7%	2.0%

Source: Japanese Society for Rehabilitation of the Disabled, *Rehabilitation in Japan 1988*, p. 39.

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Increasing numbers of physically disabled adults are living in institutions, in part because more facilities are available today than 10 years ago. One concern is that no effort is being made at rehabilitation in some of the care centers; thus, residents become institutionalized. Care-oriented institutions tend to outnumber rehabilitation centers in Japan (see Table 2). Conceivably, adequate rehabilitation could help minimize the number of disabled. Whether the increase in physically disabled adults in institutions stems from an increase in numbers of people with disabilities or possibly greater severity of disabilities or societal factors is uncertain, however. Demand may be greater than in the past because smaller homes (due to urbanization and the high cost of housing) plus fewer helpers at home (as more women enter the work force and more family units reflect two rather than three generations) add to the difficulties of keeping those with disabilities in the home. Supply also

Table 2: **Facilities for Physically and Mentally Disabled Japanese, 1989**

	Number of Facilities	Capacity	Admitted	Staff
Residential Institutions for Children				
With mental retardation	309	19,921	17,067	10,893
With autism	8	380	316	573
Who are blind	22	1,167	400	413
Who are deaf and mute	20	1,179	311	337
Hospitals or homes for disabled children	72	8,877	6,325	7,091
Hospitals or homes for children with severe mental or physical disabilities	62	6,677	6,397	8,081
National sanatoria with beds for children with severe mental or physical disabilities	80	8,080	7,753	--
National sanatoria with beds for children with progressive muscular atrophy	27	2,140	1,215	--
Rehabilitation homes for disabled children	8	425	268	233
General Residential Institutions				
For people with mental retardation	829	57,086	56,264	28,942
Welfare homes for physically disabled	9	--	135	--
Custodial care homes for physically disabled	203	--	12,881	--
Sheltered workshops for people with mental retardation	173	11,075	10,832	4,803
Sheltered workshops for physically disabled	84	--	4,607	--
Sheltered workshops for severely physically disabled	119	--	7,550	--
Day Care Facilities for Children				
With mental retardation	216	7,885	6,070	3,607
With mental and physical disabilities	237	4,740	--	--
With disabilities (unspecified)	71	3,010	2,336	1,372
Who are hard of hearing	27	905	723	403
General Day Care Facilities				
Rehabilitation centers for mentally retarded	117	4,362	4,079	1,596
Sheltered workshops for mentally retarded	369	13,453	12,852	4,431
Additional Special Needs Housing				
Reserved for people with mental retardation	39	420	356	99
Hostels for employees with mental retardation	102	2,430	2,293	622

Source: Ministry of Health and Welfare, *Annual Report on Health and Welfare, 1990-1991*, pp. 277 and 282.

could be a factor in institutionalization. The government has responded to concerns about the aging of the population, for example, by pressing for more nursing homes, although the number still is considered inadequate to meet demand. (For a look at Japan's policies on long-term care and aging, see *JEI Report* No. 14A, April 10, 1992.) The government encourages senior citizens to stay out of institutions and in homes by such measures as subsidies for helpers who assist in daily living activities at the homes of the elderly and people with disabilities. However, the scarcity of these helpers and the variations in staffing around the country leave little assurance that everyone who wants help gets it.

Most physically disabled Japanese do live at home; an estimated 93,000 of the 2.4 million adults with disabilities were in institutions in 1987, and 13,000 of the 92,500 disabled children under age 18 at that time lived in an institution. The Japanese Society for Rehabilitation of the Disabled points out that, in contrast to the increase in institutions for physically disabled adults, the number of institutions for children with hearing or visual impairment has decreased. The group attributes this drop to a diffusion of education facilities, more community-based services and, in general, increased mainstreaming, a concept in which those with disabilities are integrated into the normal routines of society. The rehabilitation advocacy group notes, however, that there are more facilities for children with severe disabilities. As an indication of the dissatisfaction with institutions that serve a minimum of 50 people and have grown into large facilities often remote from communities, the advocacy group says that more small-scale residential facilities are being established, particularly small sheltered workshops not authorized by the government.[3]

Government Helps Reshape Attitudes Toward Disabled

Before World War II and even as recently as the late 1970s Japanese with physical disabilities were seen rarely in public. This situation is changing gradually, as physically handicapped Diet members and efforts by advocates for the disabled -- foreign and domestic -- help make disabilities appear somewhat more commonplace. A critical difference from prewar days is a new outlook in Tokyo. Now required by the postwar constitution to accept primary responsibility for seeing to the welfare of society, the government's approach is in stark contrast to prewar welfare laws that listed families as the first recourse to help people with disabilities and then neighbors, with assistance from the government extended only as a last resort. In general these early provisions -- no different from some public safety laws then current in the West -- conveyed a feeling of "chastising the lazy and protecting society," according to a review of rehabilitation in Japan published in 1988 by the Japanese Society for Rehabilitation of the Disabled.[4]

Even after the postwar constitution went into effect and the government assumed responsibility for meeting citizens' social welfare needs as well as providing education and employment opportunities, progress was slow for people with disabilities. A Daily Life Security Law, passed in 1946 and revised in 1950, regulated institutions that served public aid recipients, including those with disabilities. The Japanese National Committee of the International Council on Social Welfare has noted, "The most important characteristic of the old Daily Life Security Law was that it clearly stated for the first time the principle of equal justice and nondiscrimination under national responsibility."[5]

Several laws referring to employment or vocational training for disabled people were passed and revised, starting in 1947. After a 1952 plan calling for greater employment of the disabled apparently generated little action, the Diet passed the 1960 Physically Handicapped Persons' Employment Law -- legislation that recommended quotas for various employers to meet in hiring those with physical disabilities. This law, too, was not considered effective. In 1976 the quota system became mandatory, although companies can obtain exceptions. Fines are levied on firms not in compliance. A 1987 revision of the law covered people with mental retardation.

These efforts to bring people with disabilities into the work force correspond to the concept of mainstreaming. The idea of integrating people with disabilities into every day life underpins the 1990

Americans with Disabilities Act, for example, which provides to people with disabilities a civil rights guarantee to equal access in employment, public accommodations, public services, transportation and communications. Although the job quotas in Japan do not mandate equal job opportunities, they encourage mainstreaming more than does Tokyo's application of its constitutional mandate for equal opportunities in education. The constitution states: "Equal opportunity for education has to be given to all nationals regardless of their race, beliefs, social status, financial status or family background." In practice this provision has evolved into an idea of "separate but equal." The first special education schools opened in 1948 and served children with visual and auditory handicaps. Four years later the Ministry of Education tackled educating children with other handicaps by creating a Special Education Office. This office also was asked to determine why attendance had been so low in the new schools for visually and hearing impaired children. As noted by the Japanese Society for Rehabilitation of the Disabled, "[L]ack of understanding of the objectives of compulsory education, and the effect it would have upon the children" meant that "some families tried to hide their children away, [while] others didn't want their children to leave home to receive education." But a more practical reason was financial, the group says, noting that the scarcity of special education schools meant children either had to commute daily, perhaps with paid attendants or accompanied by the parents themselves, or be housed away from home in dormitories.[6]

By 1979 the government had in place what it considered to be a sufficient number of special education schools in all prefectures to make education compulsory for children with handicaps; exceptions are granted for the most severely disabled. Although special classes at regular schools are encouraged for students with mild disabilities, schools do not have to provide such classes. By the time officials had mandated creation of special schools for all handicapped students, however, a grass-roots movement had been underway for 14 years to encourage integration in schools, particularly kindergartens and day care centers. The debate over separate institutions continues to this day. Citing the ability of special schools to design facilities and curriculum to meet the needs of students with disabilities, local governments have been known to refuse admission to regular public schools even if the handicapped students have passed a difficult entrance exam. This year a district court in Kobe issued a ruling favorable to the philosophy of mainstreaming when it ordered the nullification of a city's refusal to allow a wheelchair-bound student into a regular high school. The Amagasaki city assembly had questioned whether the student would be able to attend three years of school, based on his physical records, and had suggested that he would fare better at a school with facilities for the handicapped.

Not all school authorities have responded as the Amagasaki assembly did, but integration remains somewhat uncommon. The Ministry of Education reported that, of the 18,752 students who graduated in 1990 from junior high classes for the handicapped or schools for the blind, deaf or disabled, only 12.5 percent (2,340) went on to enroll in regular high schools or technical schools.

In providing "separate but equal" schools and recreation facilities Tokyo follows a paternalistic, protection-oriented approach rather than one that suggests integration will improve understanding of people with disabilities and, thus, increase their opportunities. The latter philosophy, as mentioned above, guides the Americans with Disabilities Act. No stranger to U.S. trends, Japan has been made more aware of the implications of this act recently by domestic and foreign efforts to encourage consideration of a comprehensive civil rights law in Japan.

Inspiration from Abroad

Both U.S. and European attitudes toward people with physical disabilities have made strong impressions on the Japanese. In fact, a rude shock delivered by American and European athletes to their Japanese counterparts at the 1964 Paralympic Games for physically handicapped athletes in Tokyo is credited with helping open the eyes of disabled Japanese to their own potential. The discovery had nothing to do with athletic skill, but everything to do with lifestyle. "U.S. and European paraplegics [at the games] all had their own job [in their own country]. All of the Japanese

were from hospitals, outside the community," recalled Ichiroh Maruyama, who had worked as a volunteer translator at the Tokyo games and now is director of the Department for the Welfare of Disabled Persons in the National Council of Social Welfare. "The Japanese were so shocked that in 1964 even though they were athletes, they were stuck in social institutions."[7] The rights of people with disabilities became the theme for several study groups, assemblies and conferences meeting in the late 1960s.

The 1964 Paralympic Games also moved one American to take a hand in hiring handicapped Japanese at his company in Japan. Justin Dart, who now heads the President's Committee on Employment of People with Disabilities, in the mid-1960s ran Tupperware operations in Japan for Dart Industries Inc. "We took 11 men from institutions into our company and started an independent-living program," Mr. Dart recently recalled, noting that the noninstitutional residence for the disabled men, who had been living in full-care institutions for between three and nine years, was the first of its kind in Japan. "The thing that I remember," he added, "All the things we did — even though there was emotional opposition by the doctors to the way we did it (we did not ask their advice any more, we just went off and did it) ... — all [these activities] had fundamental support. There was resentment but, nevertheless, they did cooperate."[8]

Mr. Dart has continued to prod authorities in Japan to take a new look at people with disabilities. In September the wheelchair-bound former businessman spoke at a conference arranged by IBM Japan Ltd. on full participation of people with disabilities in society. Calling for Japan to institute a civil rights law comparable to the Americans with Disabilities Act, passage of which he spent at least eight years promoting, Mr. Dart criticized conditions of partial equality, describing them as "intolerable to people with disabilities in Japan" as "[a]partheid is intolerable to Africans ... [and] to the world."[9] Undeterred by the noncommittal responses, Mr. Dart said he sees potential for change. Arguing against people who have said Japan lacks a civil rights tradition, he contended in a recent interview that those who predicted democracy would not work in Japan after World War II "because of no democratic tradition" have been proved wrong by what he calls "the best democracy in the world." If the Japanese decide they can do it, he added, "[they] will do it and do it better."[10]

Industry's Responses to the Disabled

When the Diet made mandatory in 1976 the previously voluntary hiring quotas for people with physical disabilities, industry responded initially by saying the requirements would make them less competitive, according to Mr. Maruyama of the government-authorized National Council of Social Welfare. Government sweetened the mandate, however, by funneling the fines instituted for noncompliance into grants to companies that meet their quota. The dual purpose of the grants is not only to help companies adapt their facilities to accommodate persons with handicaps but to encourage employment of those with disabilities. Under another program the government offers grants to subsidize up to two-thirds of large companies' wage payments to people with disabilities and three-fourths of smaller companies' wage payments for a period of up to 18 months. Government-subsidized vocational training programs incorporate training of those with disabilities. Plus, government employment offices work with industry to promote the hiring of people with disabilities.

One of industry's complaints about regulatory implementation of the Law for Employment Promotion of the Disabled is that only those disabled who work 33 hours or more a week count toward meeting a company's quota. The Ministry of Labor has said it plans to introduce next April revised standards that allow the hiring of people with disabilities who work at least 22 hours a week to satisfy quota requirements. The revision will mean that employment of a disabled person who works between 22 and 33 hours each week will count toward a company's quota. People with handicaps who put in 33 hours a week or more will count for two positions. For each person with severe mental retardation who is hired a company also can tally up two positions toward its quota. Although the new rule can be viewed as encouraging the hiring of disabled employees who might prefer fewer work hours, the other side of the coin is that companies can achieve their quotas by hiring fewer disabled persons or limiting the hours even if a person with disabilities wants to work a longer week.

Under the current system a company that employs 63 or more people is required to hire 1.6 percent of its regular work force from the disabled population. Both government and quasipublic corporations have higher quotas. As an employer government is required to draw 1.9 percent of its nonclerical staff and 2 percent of its clerical staff from among those with physical or mental disabilities. A quasipublic body's quota is for 1.9 percent of its clerical and nonclerical staff to be disabled. Compliance among all firms is improving, but a June 1992 Ministry of Labor review found 48.1 percent noncompliance. Large corporations' ratio of employees with disabilities was 1.23 percent, while all firms averaged 1.36 percent. Quasipublic bodies met their quota this year and have shown the greatest increase, starting at 0.95 percent in 1977. For the first time this year manufacturers as a group achieved the hiring target, according to Ministry of Labor figures. The ministry attributed the all-time high number of disabled people holding jobs, 229,627, to stricter guidelines under which the ministry began announcing the names of firms that had done nothing to try to hire people with disabilities or change their employment policies to accommodate such hiring.

The government had accumulated ¥24.4 billion ($194.9 million at ¥125=$1.00) by FY 1991 from noncompliance levies and made that money available to firms meeting their quota (see Table 3). Employers of more than 300 workers face levies of ¥50,000 ($400) per month for every position short of the quota. But those companies that meet their quota get rewards. A firm with a payroll of 300 or more employees can get adjustment grants of ¥25,000 ($200) per month for each person hired to meet the quota; for smaller firms the payment is ¥17,000 ($136) per person per month. Examples of how firms put their adjustment grants to work are shown in Table 4.

Table 3: **Revenues and Expenditures for Programs Employing the Disabled, FY 1985-FY 1991**

(in millions of yen)

	FY 1985	FY 1986	FY 1987	FY 1988	FY 1989	FY 1990	FY 1991*
Revenues	¥18,098	¥18,434	¥18,571	¥19,873	¥24,539	¥27,071	¥27,853
Levies	17,565	17,626	17,716	18,515	22,436	23,484	24,358
Other	533	808	855	1,358	2,103	3,587	3,495
Expenditures	13,600	12,646	12,712	13,683	17,214	24,778	31,822
Grant/Reward Program	11,925	10,740	10,670	11,417	14,749	22,017	27,803
Adjustment Grants	2,751	2,871	2,866	2,847	2,808	2,908	3,005
Rewards	1,576	1,541	1,517	1,507	2,194	3,518	3,709
Grants	7,598	6,328	6,287	7,063	9,747	15,591	21,089
Operational Costs	1,592	1,798	1,908	2,104	2,350	2,613	3,846
Other**	83	108	134	162	115	148	173

*Estimated.
**Reflects repayment of preassessed levy whenever a company came closer to meeting its quota than expected at the time of the spring assessment period.

Source: Ministry of Labor

Among the companies with one of the best records for hiring people with handicaps is the Japanese subsidiary of International Business Machines Corp. Although IBM Japan's average hiring ratio corresponds to the mandated 1.6 percent, the company goes beyond the usual adjustments of providing elevators and wider doorways to accommodate people with physical disabilities. For example, the firm grants special permission for the disabled to use a car in commuting and provides parking spaces for them at the company site, considered unusual in Japan.[11] For the 11 percent of its

Table 4: **Purposes to Which Employers Applied Grant Funds, FY 1991***

(in millions of yen)

Work Facilities	¥3,281
Equipment and Facilities	8,428
Independence of Severely Handicapped	6,257
Training	901
Special Employment Management of Severely Handicapped	1,203

*Estimated.

Source: Ministry of Labor

disabled employees who have auditory problems IBM Japan provides individual fax machines, electronic mail, sign language interpreters and hearing aids at conferences and meetings. The 4 percent of the disabled staff with sight impairment receive large-screen workstations and other aids that enlarge materials needed for their job. Nonhearing- and nonsight-related physical disabilities comprise about 78 percent of IBM Japan's hirings of those with handicaps. Among the jobs for which they are employed are: sales/systems engineers (19 percent); engineers in manufacturing development (19 percent); administration (47 percent); personnel (9 percent); and technicians (6 percent).

The current economic downturn is expected to have a detrimental effect on the hiring of people with handicaps in the near term. During past vibrant economic times, corporate health and concerns about a labor shortage improved the chances of Japanese with disabilities being hired. Now, however, incentives for hiring will have little appeal as companies vie for the cream of the crop among graduating college seniors for the reduced number of positions that they plan to fill next year. The levy/grant system lets companies make their own decisions on whether to hire or not, but without court-backed equal opportunity laws people with disabilities have little recourse — except, perhaps, to start their own business.

Improvements in Public Assistance

Under revisions to the National Pension Act in 1985 disabled people no longer considered dependents at the age of 20 can receive from the government the equivalent of what in America is SSI, Supplemental Security Income, a part of the Social Security program. If the recipient reaches a certain level of income through employment or receives money from other public assistance programs, the so-called invalidity pension payment is suspended. In 1990 the basic invalidity payment amounted to ¥877,500 ($7,000) a year for the most severely disabled and ¥702,000 ($5,600) for those with less severe but still very limited capacities. Separate provisions allow for additional annual increments of ¥202,400 ($1,600) each for up to two children (but only ¥67,500 or $540 for additional children). Although the general population is eligible for this basic social security program, only participants who contribute to a second employment-linked social security program (the Employees' Pension Insurance Scheme) can obtain benefits under less strict conditions. For example, if a person's disability is not as great as that required for the basic payment, he or she can receive a minimum of ¥526,500 ($4,200) a year.[12] A one-time lump-sum payment of ¥999,000 ($8,000) also is available to those who have been employed for a certain period but do not experience so severe a disability that they are considered eligible for the basic social security payment.

The improved system now means that "to become disabled does not necessarily mean to become poor," Mr. Maruyama notes. The arrangement allows the unemployed with disabilities — an estimated 70 percent of the physically handicapped population in 1987 — a better existence, although not a stylish one, he adds. However, as many as one-third of the families that have disabled members ranked among the poor in Japan in 1987, according to a survey that year that found nearly 33 percent

had insufficient earnings to pay income taxes. This contrasts with the 16 percent of the general population exempted from income tax payments that year.[13] Those disabled or their families who do pay income taxes get exemptions or inheritance tax deductions to help cushion their financial situation. People with the most severe disabilities are entitled to a ¥330,000 ($2,600) national income tax exemption and a ¥260,000 ($2,100) credit on their local income taxes. Parents or guardians with a disabled child in 1987 were entitled to an income tax exemption of ¥140,000 ($1,100) on their national taxes and ¥80,000 ($640) on their local taxes.

Although the general trend in public assistance payments is downward (see Table 5), the proportion of welfare recipients who have sick or disabled household members is rising.[14] A calculation by the Management and Coordination Agency showed that in 1987 someone on welfare might have about two-thirds the income of an average worker after tallying basic assistance, allowances for an attendant or caretaker of a disabled person and housing allowances.[15] Examples of 1989 payments through the Ministry of Health and Welfare to households in which there are disabled members include: ¥12,380 ($99) a month to parents who care for their disabled child at home and ¥22,760 ($182) a month in the form of a special disability allowance. People who have disabilities and receive public assistance also can obtain special rates on bank loans for, among other purposes, rehabilitation, housing, tuition and nursing care. Discounts also are available from rail lines for public transportation and on automobile taxes. Families with limited means can obtain some special needs equipment at no cost, while those who can afford to pay can rent such items as braille typewriters and hospital beds at just a portion of their regular cost. Various cities also provide assistance above that provided under prefectural and central government auspices.

Table 5: **Trends in Public Assistance, FY 1985-FY 1990**

	FY 1985	FY 1986	FY 1987	FY 1988	FY 1989	FY 1990
	Average Monthly Expenditures					
	(in millions of yen)					
Total Expenditures on Aid	¥126,940	¥124,323¥	¥121,170	¥115,811	¥114,058	¥109,838
Livelihood (Welfare)	44,799	42,759	41,131	40,058	38,375	36,667
Medical Care	70,537	69,853	68,248	64,034	63,933	61,491
Housing	8,272	8,478	8,619	8,637	8,678	8,549
	Average Monthly Payments					
	(in yen)					
Payments to Invalids or Disabled						
One-Person Households	¥226,989	¥215,080	¥206,249	¥199,725	¥194,997	¥189,240
Households of Two or More	121,892	112,756	104,521	95,011	87,421	77,851

Source: Ministry of Health and Welfare

Uneven Distribution of Opportunities

Inspired by the United Nations' declaration of the 1980s as the Decade of Disabled Persons, Japan began paying closer attention to the needs of people with handicaps. The government set December 9 as "Disabled Person's Day" to be observed annually. A national congress was convened in 1981 to draw up a long-term plan for addressing the needs of the disabled. And, of Japan's 57

prefectures and specially recognized metropolitan centers, 54 began drafting their own long-term plans and programs.[16] One of the problems with the separate plans, however, is that wherever national standards are absent, access to benefits is uneven. For example, although the central government's role in building the Shinkansen rapid-transit train network helped to assure accessibility for the handicapped who use that mode of transportation, not all locally run subway and transportation systems have similar accessibility. Kyoto has made a point of ensuring that its subway system is accessible to wheelchairs, while Tokyo provides buses with lifts for wheelchair riders on some routes, Mr. Maruyama notes. Protests were planned this fall in various cities, however, to draw attention to the transportation problems of people with disabilities.

One hope that Mr. Maruyama harbors is that the government's interest in providing for the aging population will make available to the disabled population at large specially equipped buses and other facilities that enable better access and independence. Akiko Saito of the Japan Council on Independent Living notes, however, that government officials have been reluctant to extend assistance measures designed for the elderly to people with disabilities. She recently noted that people with disabilities and their advocates have won some concessions by pressuring officials. Ms. Saito also pointed out that advocates of people with handicaps often send clients seeking welfare assistance to the welfare branch for senior citizens "because they have more budget."[17]

Not all physical disabilities are treated equally, either. While the blind have benefited from some cities, such as Tokyo, providing coded bumps on sidewalks to help them negotiate street corners, the wheelchair-bound handicapped find few sloped sidewalks that allow them to cross streets more easily. In general, observers analyzing where the government could invest to jump start Japan's slumping economy have no trouble finding a number of infrastructure improvements that would help people with disabilities throughout the country.

The troubles faced by the physically disabled who are competing for attention from the central and local governments in Japan are a fraction of those confronting people with mental disabilities. Not until a revision of employment laws in 1987, for example, were people with mental retardation added to the list of disabled people covered by the hiring quota system. Moreover, only in FY 1989 did the government expand a daily assistance program that provides meal services and guidance for health care to people with mental retardation who live in group homes as a way of promoting alternative living arrangements for those with mental disabilities. "Livelihood assistance for mentally retarded persons in the community is considered ... a turning point from the institution-oriented program of the past and one of the most important issues in the future," according to the Japanese National Committee of the ICSW.[18] This year will mark the first nationwide sports competition for people with mental disabilities, even though games for the physically disabled have been promoted for roughly 30 years. Although people with mental retardation are beginning to see many of the same considerations under law as the physically disabled, the mentally ill have had a tougher time gaining acceptance.

Bringing Mental Illness Into the Open

In the words of a representative of Zenkaren (National Federation of Families with the Mentally Ill in Japan), "The image of mental illness is 'hereditary, incurable and dangerous.'" Although physical disabilities might be understood as arising from accidents or common diseases, the mysteries of mental illness make the Japanese (and many other people) uncomfortable. Zenkaren executive director Takehisa Takizawa notes, "If social welfare systems supported the mentally ill as much as they support the physically handicapped or the mentally retarded, no persons with mental illness and their families would hide any more. At present, however, the welfare systems for the mentally ill are quite behind [in Japan] and they cannot but hide."[19]

One stimulus for change hit the headlines seven years ago, when the media disclosed abuses and allegations of fatal beatings in a limited number of mental hospitals. The reports prompted

lawyers and other concerned Japanese to ask for input from a Geneva-based nongovernmental organization affiliated with the United Nations Economic and Social Council. The International Commission of Jurists visited Japan in 1985 with the International Commission of Health Professionals and issued a highly critical assessment of the country's mental health system and its operations. As reported at that time, "unacceptable conditions of overcrowding, poor nutrition, ... physical abuse of patients, exploitation of patient labor, unjustifiable detention ..." and other concerns contributed to the group's conclusion that the mental health system then practiced was" ... conducive to inappropriate forms of care and serious human rights violations on a significant scale."[20]

Changes in the mental health laws in 1988 have improved the situation somewhat, according to the same group after an April visit this year. But the ICJ task force concluded that more revisions are necessary. It cited a "serious lack of resources, arising from the discriminatory nature of reimbursement of mental health care and welfare payments for the mentally ill as compared to other ill and disabled people."[21]

A major ICJ concern in 1985 was that the structure of the psychiatric hospitals appeared to encourage long-term stays, which served primarily to benefit physician/owners of the private hospitals rather than lead to a concerted effort to improve the patient's condition. The length of stay at psychiatric hospitals recently has averaged 500 days, according to Zenkaren. Some patients reportedly are hospitalized for as long as 10 years. To Zenkaren the 80 percent-plus private ownership rate of psychiatric hospitals means "the government has refused its responsibility for mental illness."[22] To other observers private ownership and lack of government supervision prior to reforms in 1988 have encouraged overcrowding and minimal patient care.[23] Critics question whether the increase in mental health beds in Japan has been driven by greed or need (see Table 6).

Table 6: **Mental Hospitals and Beds in Japan, 1980-89**

(as of October 1 of each year)

	1980	1985	1986	1987	1988	1989
Hospitals	977	1,026	1,035	1,044	1,048	1,047
Beds	308,554	334,589	340,506	347,196	352,504	355,743

Source: Ministry of Health and Welfare

After its latest review, which took note of the 1988 reforms to the Mental Health Act, the International Commission of Jurists acknowledged that the number of psychiatric beds had stabilized at about 28 beds per 10,000 population and that occupancy rates were now less than 100 percent. The average hospital stay also has been reduced but still remains above the international average, the panel noted. Among other major improvements were the increase in voluntary admissions and the creation of psychiatric review boards to serve as an appeals body for involuntary commitment. Prior to the 1985 ICJ review one government survey indicated that as many as 93 percent of patients in psychiatric hospitals had been committed involuntarily.[24] By 1989 that ratio had dropped. Still, patients in protective custody were the dominant portion of the population at 47.8 percent, according to the Japanese National Committee of ICSW. Protective custody admissions in Japan are those in which a guardian gives permission for hospitalization with or without the patient's consent. Some hospitalizations ordered by authorities might be aimed at protecting the potential patient from harming himself or herself, but these cases also can be initiated after an application by citizens or police and a diagnosis by two or more mental health physicians; such authorized hospitalizations formed 4 percent of admissions in 1989. About 44 percent of the admissions that year were discretionary.

Among the ICJ's recent recommendations was that involuntary commitment by a guardian no longer be allowed in Japan because "the existence of two different forms of involuntary admission creates a regrettable conflict of interest between the person to be admitted and his family members. The role of the family in committing the patient may seriously impede the patient's treatment."[25] Among other human rights issues decried by the ICJ group were: more than half the patients voluntarily undergoing treatment were put on locked wards and "the welfare system discriminates against mentally ill recipients by paying them approximately half of what is paid to the physically disabled."

The near-absolute authority of doctors in Japan, where few patients either expect or get full explanations of their health conditions, contributes to the difficulties in assuring mental health patients of their rights. But the government is able through legislation to provide an overall philosophy toward the care of the mentally ill. Further revisions of the mental health law are under consideration, possibly as soon as next year.

Another area in which the government has a direct influence is in the funding of more community-based mental health centers and outpatient treatment centers, considered key to discharging the estimated 30 percent of the inpatient population that could be treated on an outpatient basis if adequate facilities existed. The ICJ's April report noted that an experiment in Hokkaido had shown the feasibility of implementing a coordinated care system that involved community-based care.[26]

Outlook

Governments either set the tone of society's human rights policy, occasionally being in the forefront of opinion, or they reflect the views of society at large and work to change attitudes very slowly. In the realm of civil rights for people with physical and mental disabilities in Japan the government has tended to be a follower. For a society that prides itself on consensus that approach is not surprising. One result is that, once an approach is adopted, much of society already is well-informed and ready to take corresponding actions. A critical factor for the human rights of the disabled in any country, according to Mr. Dart of the President's Committee on Employment of Disabled People, is attitude, which he terms "99 percent of discrimination."

In pursuing passage of the Americans with Disabilities Act Mr. Dart often cited estimates that the cost to the United States of excluding the two-thirds of the American population with disabilities who are not now part of the mainstream is about $200 billion annually. That cost stems not only from lost productivity that could be captured if people with handicaps had better access to jobs but from the costs of inappropriate care when more people could be helped toward independence. When he spoke in Japan this September Mr. Dart noted, "The cost in other nations is equally punitive."

The paternal approach now followed in Japan has its own costs. Providing separate schools rather than equal access at all schools, for example, not only has a direct budgetary impact but impedes understanding of disabilities because able and handicapped students have less opportunity to interact with each other. Families of people with disabilities also face a direct cost when they have to pay whatever medical charges are not covered by the country's system of health insurance; conversely, the government's costs rise when inappropriate long-term care saps family budgets and requires coverage from public assistance or the long-term medical coverage program for lengthy hospitalizations.

The perils of paternalism also include its tendency to encourage halfhearted acceptance of the capacities of people with disabilities. At the same time the philosophy of mainstreaming in society has its problems, as evidenced by the number of homeless Americans who otherwise might be in mental institutions. Both philosophies require some oversight. "Father knows best" is not always true in cases of paternalism, because that protective philosophy can result in too many limits being placed on people who have much to contribute to society. Conversely, mainstreaming encourages equal access

to opportunities but without follow-up could result in people with severe disabilities falling through the cracks that are present in any system.

Japan tends toward the "separate but equal" philosophy assailed in the United States by the 1954 Supreme Court decision banning racially segregated public schools. Integration has yet to be promoted on a broad scale in Japan, where the unfamiliar — unless in the form of a fad — has little acceptance. "Basic attitudes toward disability will take a long time [to change]," the National Council of Social Welfare's Mr. Maruyama says. "Same is comfortable; different is uncomfortable." Through the interaction of people working together, discrimination would be overcome on all levels, he argues, adding, "That's not just true of those with disability but for women, Asians, Koreans, foreigners."

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Notes

[1]Telephone interview with Harold Visotsky, Department of Psychiatry, Northwestern University, Chicago, Illinois, October 21, 1992.

[2]For a look at workers' compensation in Japan, see Richard E. Wokutch and Josetta S. McLaughlin, "The U.S. and Japanese work injury and illness experience," *Monthly Labor Review*, CXV, No. 4, April 1992, pp. 3-11.

[3]Japanese Society for Rehabilitation of the Disabled, *Rehabilitation in Japan 1988* (Tokyo: 1988), p. 183.

[4]*Ibid., p. 55.*

[5]Japanese National Committee of the International Council of Social Welfare, *Social Welfare Services in Japan* (revised 1990 edition) (Tokyo: 1991), p. 32.

[6]Japanese Society for Rehabilitation of the Disabled, *op. cit.*, p. 120.

[7]Interview with Ichiroh Maruyama, director, Department for the Welfare of Disabled Persons, National Council of Social Welfare, in Washington, D.C., September 2, 1992.

[8]Interview with Justin Dart, chairman, President's Committee on Employment of People with Disabilities, Washington, D.C., October 1, 1992.

[9]Remarks prepared for delivery by Justin Dart to the IBM Conference on Full Participation in a Modern Society, Tokyo, Japan, September 15, 1992.

[10]Dart interview, *op. cit.*

[11]Personal communication from Tadashi Saito, manager, Resource Management, IBM Japan Ltd., October 20, 1992.

[12]Social Insurance Agency, *Outline of Social Insurance in Japan 1990* (Tokyo: Japan International Social Security Association, March 1991), pp. 73 and 85.

[13]Japanese National Committee, ICSW, *op. cit.*, p. 69.

[14]Japanese National Committee, ICSW, *op. cit.*, p. 39.

[15]Cited in Japanese National Committee, ICSW, *op. cit.*, p. 43.

[16]Japanese National Committee, ICSW, *op. cit.*, pp. 63-64.

[17]Personal communication from Akiko Saito, Japan Council on Independent Living, October 26, 1992.

[18]Japanese National Committee, ICSW, *op. cit.*, p. 74.

[19]Personal communication from Takehisa Takizawa, executive director, Zenkaren (National Federation of Families with the Mentally Ill in Japan), as translated by Kazuyo Nakai, October 23, 1992.

[20]Alun Anderson, "Mounting pressure for reform," *Nature*, CCCXVI, No. 6029, August 15-21, 1985, p. 571.

[21]Press release from International Commission of Jurists, "Jurists Urge Better Protection for Mentally Ill in Japan," July 22, 1992.

[22]Takizawa, *op. cit.*

[23]Anderson, *op. cit.*

[24]Anderson, *op. cit.*

[25]International Commission of Jurists, *op. cit.*

[26]International Commission of Jurists, *op. cit.*

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The views expressed in this report are those of the author and do not necessarily represent those of the Japan Economic Institute.